

Building Occupancy Classification Inventory Form

For Use by Unidocs Member Agencies or where approved by your Local Jurisdiction

Plan Check No.: _____ Proposed Occupancy Classification: _____ Signature of Preparer: _____ Date: ____/____/____.

Control Area No.: _____ Is this area protected by a fire sprinkler system? ☐ Yes; ☐ No.

1. Room No.	2. Chemical Name & Concentration (Not Trade Name)	3. UBC Class*		4. Quantity Stored	5. Quantity in Use*		6. Stored in Approved Cabinet
		Physical	Health		Open	Closed	
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No

* Please see the instructions on the reverse side of this page for a list of UBC hazard classes and definitions of open use and closed use.

Instructions for Completing the Building Occupancy Classification Inventory Form

A critical first step in the plan check process is the establishment of proper building occupancy classification. The occupancy classification determines the standard to which your plans will be reviewed. This form is a guidance document which has been prepared to expedite the review process. Please note that submittal of this form does not satisfy Hazardous Materials Business Plan (HMBP) Inventory reporting requirements.

Complete a separate inventory for each control area (or a single inventory for the entire building if control areas are not established). Group materials within each room by their primary Uniform Building Code (UBC) hazards, then indicate additional physical and health hazards. Where several classes are given (e.g. Oxidizer 1,2,3,4), please indicate the appropriate one.

Physical Hazards*	Health Hazards*
Combustible Liquid - Class II, IIIA, IIIB	Corrosive
Combustible Fiber - loose, baled	Highly Toxic
Cryogenic	Irritant
Explosive	Sensitizer
Flammable Solid	Toxic
Flammable Gas - gaseous, liquefied	Other Health Hazards
Flammable Liquid - Class IA, IB, IC, Combination IA, IB, IC	
Organic Peroxide - Class I, II, III, IV, V	
Oxidizer - Class 1, 2, 3, 4	
Oxidizer (gas) - gaseous, liquefied	
Pyrophoric	
Unstable (reactive) - Class 1, 2, 3, 4	
Water Reactive - Class 1, 2, 3	

* Definitions of physical hazards and health hazards can be found in the Uniform Fire Code.

Definitions

Closed Use - Use of a solid or liquid hazardous material in a closed vessel or system that remains closed during normal operations where vapors emitted by the product are not liberated outside of the vessel or system and the product is not exposed to the atmosphere during normal use; and all uses of compressed gases. Examples of closed systems for solids and liquids include product conveyed through a piping system into a closed vessel, system, or piece of equipment; reaction process operations; etc.

Control Area - A building or portion of a building within which the exempted amounts of hazardous materials may be stored, dispensed, handled, or used. Control areas shall be separated from each other by a minimum one-hour fire-resistive occupancy separation. The number of control areas in buildings or portions of buildings used for retail or wholesale sales shall not exceed two. The number of control areas in buildings with other uses shall not exceed four.

Open Use - Use of a solid or liquid hazardous material in a vessel or system that is continuously open to the atmosphere during normal operations and where vapors are liberated, or the product is exposed to the atmosphere during normal operations. Examples of open systems for liquids include dispensing from or into open beakers or containers; dip tank operations; plating operations; etc.

Make additional copies of the form if needed. Number each page appropriately. To assist you, an example of a properly completed inventory has been included as an attachment to this document.

Building Occupancy Classification Inventory Form

(EXAMPLE)

Plan Check No.: 2468 Proposed Occupancy Classification: F-1 Signature of Preparer: _____ Date: 5/17/00.

CONTROL AREA No.: 1 Is the entire area protected by a fire sprinkler system? ☒ Yes; ☐ No.

1. Room No.	2. Chemical Name & Concentration (Not Trade Name)	3. UBC Class*		4. Quantity Stored	5. Quantity in Use*			6. Stored in Approved Cabinet
		Physical	Health		Open		Closed	
101	Acetone	FL 1B	+Irr	20 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	5 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		0 <input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
101	Hydrochloric Acid		Corr	55 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	25 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		0 <input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
101	Sodium Persulfate	Oxi 4		20 <input type="checkbox"/> gal. <input checked="" type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	0 <input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		20 <input type="checkbox"/> gal. <input checked="" type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
102	Gasoline	FL 1B		10 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	0 <input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		1 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
103	Tetrahydrofuran	FL 1B +Unstable	+Irr	50 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	0 <input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		10 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	TOTALS IN CONTROL AREA	FL 1B		80 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	5 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		11 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
			Irr	70 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	5 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		10 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
			Corr	55 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	25 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		0 <input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
		Oxi 4		20 <input type="checkbox"/> gal. <input checked="" type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	0 <input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		20 <input type="checkbox"/> gal. <input checked="" type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
		Unstable		50 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	0 <input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		10 <input checked="" type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³		<input type="checkbox"/> gal. <input type="checkbox"/> lbs. <input type="checkbox"/> ft. ³	<input type="checkbox"/> Yes <input type="checkbox"/> No

* Please see the instructions on the reverse side of this page for a list of UBC hazard classes and definitions of open use and closed use.

[Note: This example shows only the page which describes Control Area #1. Other areas would be listed on the additional pages (i.e. pages 2-9.)]